

2024 Open Enrollment Frequently Asked Questions (FAQs)

PLAN CHANGE QUESTIONS

What are the benefit plan changes for 2024?

The University will now be partnering with Aetna to offer medical coverage, replacing Blue Shield.

- Blue Shield Trio HMO will be replaced by Aetna Whole Health (AWH).
- Blue Shield Access+ HMO will be replaced by Aetna HMO.
- Blue Shield PPO will be replaced by Aetna PPO HDHP (Open Access Managed Choice POS).

Kaiser HMO will continue but will now include acupuncture benefits. All other elements of the plan design (copays, out of pocket maximum, etc.) remain the same.

Delta Dental PPO will be replaced by Guardian PPO.

See the medical and dental FAQs below for further information.

Are the benefits under the Aetna plans the same as they were under Blue Shield?

The University mirrored the Blue Shield plans as much as possible when choosing the Aetna plan designs. Therefore, plan elements such as co-pays, co-insurance, and deductibles are generally the same. More information will be provided on the Open Enrollment website soon.

I am currently enrolled in one of the Blue Shield HMOs that will not be offered in 2024. Will the primary care physician (PCP) I've designated with Blue Shield automatically transfer to the replacement Aetna plan?

Your Blue Shield PCP designations for you (and any enrolled dependents) will not automatically transfer to Aetna. In Workday, you will need to enter the 6-digit Aetna-specific provider code. You can find instructions here:

https://www.scu.edu/media/offices/human-resources/documents/benefits/open-enrollment/Aetn aMedicalProviderLookUp.pdf. Once Open Enrollment ends, the PCP designations made in Workday will be provided to Aetna. If an invalid provider code was entered, Aetna will auto assign your PCP. Rest assured that if this happens, if you'd like you may change your PCP directly with Aetna once they've processed your enrollment.

What criteria were used by the Benefits Committee in evaluating and selecting new or different benefit plan options?

We solicited bids from multiple medical providers, with the goal of continuing to provide options (two healthcare carriers) for our employees, while offering the overall same level of quality of care and while limiting cost increases.

We elected to maintain Kaiser Permanente, and replace Blue Shield with Aetna as the additional medical option for benefits-eligible employees. The transition from Blue Shield to Aetna provides a significantly lower cost increase for 2024 and provides for cost predictability in 2025 and 2026. We analyzed whether the providers utilized by University employees and their dependents are currently in-network with Aetna.

The analysis found limited disruption, with 92% of the providers utilized by Trio enrollees also in-network for the comparable Aetna plan. That percentage grows to 97% for Access+ and close to 100% for the PPO plan.

The 2022 Benefits Committee survey identified concerns regarding our dental administrator including dental coverage, dentists dropping Delta dental, billing procedures, and requirement of payment up-front. Guardian was selected for their competitive pricing, large network of in-network dental providers, and anticipated improvement in claims experience for our members.

GENERAL OPEN ENROLLMENT QUESTIONS

What are the dates for Benefits Open Enrollment?

November 7, 2023 through November 27, 2023

When will the Benefits Open Enrollment Coverage take effect?

Any elections or benefit changes made during Open Enrollment will take effect on January 1, 2024.

How do I review my current benefit enrollments?

In Workday, select the Benefits App ---> Select the "Benefits Elections as of Date" sub-menu ---> Enter today's date for the View as of Date

When and how can I make changes to my benefit enrollments?

All benefits-eligible employees will be able to make changes in Workday beginning Tuesday, November 7 through Monday, November 27.

I don't wish to change my benefit enrollments, do I have to take any action in Workday? It is important you understand what your elections will be in Workday for 2024 if you take no action. Your 2023 elections in Workday will be rolled over to 2024 as follows:

• If you are enrolled in a Blue Shield HMO plan, you will be enrolled in the comparable Aetna HMO plan (see first question in this FAQ for plan comparability).

- If you are enrolled in the Blue Shield PPO/HDHP, you will be enrolled in the Aetna OAMC PPO/HDHP. If you also had an HSA election, it has rolled over.
- If you are enrolled in the Delta dental PPO plan, you will be enrolled in the Guardian dental PPO plan.
- If you are enrolled in a Flexible Spending Account (Healthcare, Dependent Care, or Limited Purpose FSA), your 2023 election will not roll over to 2024. You must make a new FSA election every year.
- If you are enrolled in the Mass Transit FSA, funds carryover each month. Remember that you can enroll or make changes to this benefit at any time.
- If you were enrolled in Kaiser, vision and/or life insurance, these elections rolled over to 2024.
- If you were enrolled in the SCU medical waiver plan and are receiving \$75/paycheck from the University, your waiver rolled over.

Even if you believe the above accurately reflects your desired enrollment for 2024, we strongly encourage all benefit-eligible employees to review their benefits enrollment when the system opens up. This will be your opportunity to ensure your benefit plan elections are correct, you're covering the family members intended, and that you understand how much your benefit deductions will be in 2024.

Can I change my elections after Open Enrollment ends?

Per IRS regulations and carrier agreements, changes outside of Open Enrollment are not allowed unless you have a qualifying life/family status event. Examples of a qualifying event include marriage, divorce, birth/adoption of a child, and losing or gaining other coverage. This is not an exhaustive list; please check with the Benefits Department if you have a different event that you believe may qualify. If you experience such an event and wish to make benefit changes, you must request your changes within 30 days of the event (60 days if the event is loss of eligibility for or enrollment in Medicaid, Medicare, or state health insurance programs).

If I am on a Leave of Absence, what is the best way to make sure that I can complete my enrollment choices?

Beginning November 7, you will be able to log into Workday and select the Benefit Event that should be awaiting in your inbox.

What if I need to add dependents?

Log into Workday. Click on the Benefits Worklet \rightarrow Add Dependent. Make sure to make the Benefit Reason Add Dependent \rightarrow Open Enrollment/Other. Also, be sure to have Social Security Numbers for each of your dependents and upload a completed affidavit.

What is the age limit for covering a dependent child?

Your dependent children will be covered until the end of the month in which they turn 26.

MEDICAL PLAN QUESTIONS

Are there any changes to the Kaiser Plan?

The Kaiser plan now includes an acupuncture benefit and specialty tier Rx. Please review the 2024 rate sheet as the per paycheck amounts have increased.

What is the difference between the Aetna Whole Health (AWH) HMO and the Aetna HMO?

The plan designs (co-pays, out of pocket maximums, etc.) of these two HMOs are the same. The per-paycheck cost of AWH is less than the Aetna HMO, but the AWH plan has a more limited network of healthcare providers. For example, in the Bay Area, providers who are a part of the Palo Alto Medical Foundation are in-network for the HMO but not for AWH. To find out if your provider is in-network with either of these plans, refer to the next question. You may also view a listing of California medical groups/IPAs here:

https://www.scu.edu/media/offices/human-resources/documents/benefits/summary-plan-documents/Aetna-California-Network-IPA-Listing.pdf. This listing will show you at a glance whether a particular medical group/IPA is in-network for both AWH and the Aetna HMO, or just the Aetna HMO.

How do I find out if my doctor is in-network with Aetna?

Visit Aetna: https://www.aetna.com/individuals-families/find-a-doctor.html.

- Under "Guests," choose "Plan from an employer."
- Under "Continue as a guest," enter your preferred location and radius, then choose "Search."
- Under "Select a Plan," look for the plan you're interested in:
 - Under "Aetna Whole Health Plans" choose "(CA) Aetna Whole Health –
 Northern California HMO." This is the Blue Shield Trio HMO replacement.
 - Under "Aetna Standard Plans," choose "HMO." This is the Blue Shield Access+ HMO replacement.
 - Under "Aetna Open Access Plans," choose "OA Managed Choice POS HDHP (OAMC)." This is the Blue Shield PPO/HDHP replacement.
 - Select "Continue."
 - You may then search by your provider's name or choose a category to browse available in-network doctors in your area.

For a step-by-step guide with screenshots of the Aetna site, please visit https://www.scu.edu/media/offices/human-resources/documents/benefits/open-enrollment/AetnaMedicalProviderLookUp.pdf. You may also contact your provider's office directly to inquire whether they are in-network for the plan you're interested in.

I am enrolling in one of the Aetna HMOs and Workday is requiring that I enter a Provider ID. What is this and where do I find it?

Each Primary Care Physician (PCP) that is in-network with Aetna has a 6-digit Provider ID Code. Instructions for identifying this code can be found here:

https://www.scu.edu/media/offices/human-resources/documents/benefits/open-enrollment/Aetn aMedicalProviderLookUp.pdf. If you do not wish to designate a PCP at this time and instead be auto-assigned one by Aetna based on your zip code, enter "none" in the Provider ID field in Workday. PCP designations can always be changed directly with Aetna once you are enrolled.

Is the Aetna replacement for the Blue Shield PPO also a PPO plan?

Yes, it operates as a "true" PPO plan although the terminology can be a little confusing. The "official" name of Aetna plan is Open Access Managed Choice POS plan. It is built as an open access plan that operates the same way as what other carries call a PPO. You may also see it referred to as a High Deductible Health Plan (HDHP).

I currently have the Blue Shield PPO/HDHP with HSA. If I enroll in the Aetna PPO/HDHP, can I continue to contribute to my HSA, and will the University continue to make a contribution?

Yes. If you're enrolled in the Aetna HDHP/PPO, you may continue contributing to your HSA, and the University will continue contributing \$25/paycheck.

Will there be a new HSA custodian/vendor, or will it continue to be Health Equity? We are remaining with Health Equity.

What if I am in the middle of treatment with Blue Shield when we switch to Aetna?

Please check to see if the provider currently providing treatment is in-network with Aetna. If they are not, in some situations and for certain medical conditions you may continue treatment with an out-of-network provider for a limited time under Aetna's "transition of care" provision. More information about transition of care will be available from Aetna in advance of Open Enrollment. If you are particularly concerned about transition of care and we have not yet made further information available, please reach out to the Benefits Department.

Do I need to take any action to be enrolled in the new Aetna medical plan?

We strongly encourage all benefit-eligible employees to review their benefits enrollment when the Workday system opens up to ensure your benefit enrollments are correct. If no election is made, benefit-eligible employees who are currently enrolled in one of the Blue Shield plans will be "mapped" to the equivalent Aetna medical plan.

DENTAL PLAN QUESTIONS

Is the new Guardian plan a PPO?

Yes, it is a dental PPO plan. As such, you may go to any dental provider, but will likely have less out-of-pocket cost if you receive services from an in-network provider.

How do I find out if my dentist is in-network with Guardian?

Visit Guardian: https://www.guardiananytime.com/fpapp/search. Select DentalGuard Preferred as the plan type. You may also ask your dental provider if they are in-network with the Guardian PPO. If your provider is not in-network, you may consider nominating them to join the network. To do this, visit the same link above; at the bottom left of the page you will see "Nominate a Dentist." Guardian will then reach out to the provider and encourage them to join the network. *Providers are not made aware of who nominated them to join the network*.

Do I need to take any action to be enrolled in the new dental plan?

Whereas benefit-eligible employees who are currently enrolled in the Delta Dental plan will be "mapped" to the new Guardian dental plan, we strongly encourage all benefit-eligible employees to review their benefits enrollment when the Workday system opens up to ensure your benefit enrollments are correct.

Do I need to take any action to be enrolled in the new Aetna medical plan?

We strongly encourage all benefit-eligible employees to review their benefits enrollment when the Workday system opens up to ensure your benefit enrollments are correct. If no election is made, benefit-eligible employees who are currently enrolled in one of the Blue Shield plans will be "mapped" to the equivalent Aetna medical plan.

I'm currently enrolled in a Blue Shield medical plan and/or Delta Dental. Will I automatically be enrolled in the comparable Aetna medical and/or Guardian Dental plan? What if I'm currently enrolled in Kaiser and want to remain with Kaiser?

Due to the various changes, this year will be an "active" enrollment period, strongly encouraging all benefits-eligible employees to review their healthcare options and make benefits enrollment elections. If you plan to opt out of any current benefits, you must waive them in Workday.

What if I am in the middle of treatment with Delta Dental or Blue Shield when we switch to Guardian and Aetna?

For current Blue Shield enrollees: Please check to see if the provider currently providing treatment is in-network with Aetna. If they are not, in some situations and for certain medical conditions you may continue treatment with an out-of-network provider for a limited time under Aetna's "transition of care" provision. Please contact the SCU Benefits Department if you believe you or a dependent will have a need for transition of care. The Benefits Department will arrange for you to speak directly with Aetna.

For Delta Dental enrollees: Delta is not required to predetermine services beyond the termination date (12/31/2023) or to pay for services provided after the termination date, except for single procedures begun while the contract was in effect which are otherwise benefits

under the current contract. We encourage you to check with your dental provider if you will be mid-treatment when this transition takes place. We will also be providing Guardian contact info in advance of Open Enrollment, and you may contact them with questions about your specific situation.

VISION PLAN QUESTIONS

Do I need to enroll in Anthem Blue View Vision if I am in the Kaiser Plan?

As a Kaiser member, vision is covered through the Kaiser plan. However, you may also enroll in Anthem Blue View Vision for additional coverage.

Do I need to enroll in Anthem Blue View Vision if I plan to enroll in an Aetna medical plan?

Yes. Our Aetna medical plans do not include vision coverage. If you need vision coverage, you will need to enroll in the Anthem Blue View Vision plan.

RETIREMENT PLAN QUESTIONS

Can I enroll in the 403(b) or change my election during Open Enrollment?

Once you are eligible to participate in the University's 403(b) plan, you can enroll or make changes at any time. You aren't limited to the Open Enrollment period! Please visit https://www.scu.edu/hr/benefits/financial-planning-benefits/retirement-benefits/ for more information about our retirement plans, including links to our retirement portal and instructions for making changes.